

Please type a plus sign (+) inside this box →



Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. PC11805A	
		First Inventor Laura C. Blumberg	
		Title Novel Piperidine Derivatives	
		Express Mail Label No. EV328359919US	

(Only for new nonapplications under 37C.F.R. §1.53(b))

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents Box 1450 Alexandria, VA 22313-1450
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1. ☒ *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. ☐ Applicant claims small entity status
See 37 CFR 1.27

3. ☒ Specification [Total Pages 86]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☐ Drawing(s) (35 U.S.C. 113) [Total sheets]

5. ☐ Oath or Declaration [Total pages]

a. ☐ Newly executed (original or copy)

b. ☐ Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6.. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. ☐ Computer Readable Copy (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies)

ii. ☐ Paper

c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: ____/____

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

18. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

28523

Name			
Address			
City	State	Zip Cod	
Country	Teleph ne	Fax	

NAME (Print/type)	Lisa A. Samuels	Registrati n N . (Attorney/Agent)	43,080
Signature		Date	7/8/03

21904 U.S. PTO 10/616843

07/08/03

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3>				Complete if Known			
<input type="checkbox"/> Applicant claims small status. See 37 CFR 1.27 Total Amount of Payment (\$750.00)				Application Number		To be assigned	
				Filing Date		Herewith	
				First Named Inventor		Laura C. Blumb rg	
				Examiner Name		To be assigned	
				Art Unit		To be assigned	
				Attorney Docket No.		PC11805A	

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																																																																					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 16-1445 Deposit Account Name: Pfizer Inc.				3. ADDITIONAL FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge-late filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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late fee or oath		1052	50	2052	25	Surcharge-late filing fee or cover sheet		1053	130	1053	130	Non-English specification		1812	2,520	1812	2,520	For filing a request for reexamination		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		1251	110	2251	55	Extension for reply within first month		1252	410	2252	205	Extension for reply within second month		1253	930	2253	465	Extension for reply within third month		1254	1,450	2254	725	Extension for reply within fourth month		1255	1,970	2255	985	Extension for reply within fifth month		1401	320	2401	160	Notice of Appeal		1402	320	2402	160	Filing a brief in support of an appeal		1403	280	2403	140	Request for oral hearing		1451	1,510	1451	1,510	Petition to institute a public use proceeding		1452	110	2452	55	Petition to revive - unavoidable		1453	1,300	2453	650	Petition to revive - unintentional		1501	1,300	2501	650	Utility issue fee (or reissue)		1502	470	2502	235	Design issue fee		1503	630	2503	315	Plant issue fee		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)		1801	750	2801	375	Request for Continued Examination (RCE)		1806	180	1806	180	Submission of Information Disclosure Statement		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))		1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))		Other Fee (specify) _____						*Reduced by Basic Filing Fee Paid						SUBTOTAL (3)				(\$)		0.00	
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FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750
1002	330	2002	165	Design filina fee	
1003	520	2003	260	Plant filina fee	
1004	750	2004	375	Reissue filina fee	
1005	160	2005	80	filing fee	
SUBTOTAL (1)				750	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
		Extra Claims	Fee from below		Fee Paid
Total Claims	14	-20**=	0 x 18	=	0.00
Independent Claims	1	-3**=	0 x 84	=	0.00
Multiple Dependent			280	=	0.00
** or number previously paid, if greater; For Reissues, see below					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$) 0.00	

SUBMITTED BY				Complete (if Applicable)			
Name (Printed/Type)		Lisa A. Samuels		Reg. Number		43,080	
Signature				Date		7/8/03	
				Telephone		860-686-0349	

EXPRESS MAIL NO. EV328359919US